

BEST AVAILABLE COPY

POSITION	ID NO.	DATE
CLASSIFIER	11	12/2/93
EXAMINER	357	12/03/93
TYPIST	2LQ	12-26-93
VERIFIER	120	12/11/93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
1	Original 11/16/94
2	1-2-97
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SYMBOLS

✓ Rejected
■ Allowed
-	(Through number) Canceled
+ Restricted
N Non-elected
I Interference
A Appeal
O Objected

Claim	Date
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